



Senate

General Assembly

File No. 32

February Session, 2016

Substitute Senate Bill No. 10

Senate, March 14, 2016

The Committee on Children reported through SEN. BARTOLOMEO of the 13th Dist., Chairperson of the Committee on the part of the Senate, that the substitute bill ought to pass.

AN ACT INCREASING ACCESS TO CHILD CARE FOR CHILDREN WHO ARE HOMELESS.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Subsection (a) of section 17b-749 of the 2016 supplement
2 to the general statutes is repealed and the following is substituted in
3 lieu thereof (*Effective from passage*):

4 (a) The Commissioner of Early Childhood shall establish and
5 operate a child care subsidy program to increase the availability,
6 affordability and quality of child care services for families with (1) a
7 parent or caretaker who [(1)] (A) is working or attending high school,
8 or [(2)] (B) receives cash assistance under the temporary family
9 assistance program from the Department of Social Services and is
10 participating in an approved education, training or other job
11 preparation activity, or (2) homeless children and youths, as defined in
12 42 USC 11434a, as amended from time to time, who have been
13 designated as in need of protective services by the Commissioner of

14 Early Childhood, for purposes of 42 USC 9858n, as amended from time
15 to time. Services available under the child care program shall include
16 the provision of child care subsidies for children under the age of
17 thirteen or children under the age of nineteen with special needs. The
18 Office of Early Childhood shall open and maintain enrollment for the
19 child care subsidy program and shall administer such program within
20 the existing budgetary resources available. The office shall issue a
21 notice on the office's Internet web site any time the office closes the
22 program to new applications, changes eligibility requirements,
23 changes program benefits or makes any other change to the program's
24 status or terms, provided the office shall not be required to issue such
25 notice when the office expands program eligibility. Any change in the
26 office's acceptance of new applications, eligibility requirements,
27 program benefits or any other change to the program's status or terms
28 for which the office is required to give notice pursuant to this
29 subsection, shall not be effective until thirty days after the office issues
30 such notice.

31 Sec. 2. Section 19a-79 of the 2016 supplement to the general statutes
32 is repealed and the following is substituted in lieu thereof (*Effective*
33 *from passage*):

34 (a) The Commissioner of Early Childhood shall adopt regulations,
35 in accordance with the provisions of chapter 54, to carry out the
36 purposes of sections 19a-77 to 19a-80, inclusive, and 19a-82 to 19a-87,
37 inclusive, and to assure that child care centers and group child care
38 homes shall meet the health, educational and social needs of children
39 utilizing such child care centers and group child care homes. Such
40 regulations shall (1) specify that before being permitted to attend any
41 child care center or group child care home, each child shall be
42 protected as age-appropriate by adequate immunization against
43 diphtheria, pertussis, tetanus, poliomyelitis, measles, mumps, rubella,
44 hemophilus influenzae type B and any other vaccine required by the
45 schedule of active immunization adopted pursuant to section 19a-7f,
46 including appropriate exemptions for children for whom such
47 immunization is medically contraindicated and for children whose

48 parents or guardian objects to such immunization on religious
49 grounds, and that any objection by parents or a guardian to
50 immunization of a child on religious grounds shall be accompanied by
51 a statement from such parents or guardian that such immunization
52 would be contrary to the religious beliefs of such child or the parents
53 or guardian of such child, which statement shall be acknowledged, in
54 accordance with the provisions of sections 1-32, 1-34 and 1-35, by (A) a
55 judge of a court of record or a family support magistrate, (B) a clerk or
56 deputy clerk of a court having a seal, (C) a town clerk, (D) a notary
57 public, (E) a justice of the peace, or (F) an attorney admitted to the bar
58 of this state, (2) specify conditions under which child care center
59 directors and teachers and group child care home providers may
60 administer tests to monitor glucose levels in a child with diagnosed
61 diabetes mellitus, and administer medicinal preparations, including
62 controlled drugs specified in the regulations by the commissioner, to a
63 child receiving child care services at such child care center or group
64 child care home pursuant to the written order of a physician licensed
65 to practice medicine or a dentist licensed to practice dental medicine in
66 this or another state, or an advanced practice registered nurse licensed
67 to prescribe in accordance with section 20-94a, or a physician assistant
68 licensed to prescribe in accordance with section 20-12d, and the written
69 authorization of a parent or guardian of such child, (3) specify that an
70 operator of a child care center or group child care home, licensed
71 before January 1, 1986, or an operator who receives a license after
72 January 1, 1986, for a facility licensed prior to January 1, 1986, shall
73 provide a minimum of thirty square feet per child of total indoor
74 usable space, free of furniture except that needed for the children's
75 purposes, exclusive of toilet rooms, bathrooms, coatrooms, kitchens,
76 halls, isolation room or other rooms used for purposes other than the
77 activities of the children, (4) specify that a child care center or group
78 child care home licensed after January 1, 1986, shall provide thirty-five
79 square feet per child of total indoor usable space, (5) establish
80 appropriate child care center staffing requirements for employees
81 certified in cardiopulmonary resuscitation by the American Red Cross,
82 the American Heart Association, the National Safety Council,

83 American Safety and Health Institute or Medic First Aid International,
84 Inc., (6) specify that on and after January 1, 2003, a child care center or
85 group child care home (A) shall not deny services to a child on the
86 basis of a child's known or suspected allergy or because a child has a
87 prescription for an automatic prefilled cartridge injector or similar
88 automatic injectable equipment used to treat an allergic reaction, or for
89 injectable equipment used to administer glucagon, (B) shall, not later
90 than three weeks after such child's enrollment in such a center or
91 home, have staff trained in the use of such equipment on-site during
92 all hours when such a child is on-site, (C) shall require such child's
93 parent or guardian to provide the injector or injectable equipment and
94 a copy of the prescription for such medication and injector or injectable
95 equipment upon enrollment of such child, and (D) shall require a
96 parent or guardian enrolling such a child to replace such medication
97 and equipment prior to its expiration date, (7) specify that on and after
98 January 1, 2005, a child care center or group child care home (A) shall
99 not deny services to a child on the basis of a child's diagnosis of
100 asthma or because a child has a prescription for an inhalant medication
101 to treat asthma, and (B) shall, not later than three weeks after such
102 child's enrollment in such a center or home, have staff trained in the
103 administration of such medication on-site during all hours when such
104 a child is on-site, and (8) establish physical plant requirements for
105 licensed child care centers and licensed group child care homes that
106 exclusively serve school-age children. When establishing such
107 requirements, the Office of Early Childhood shall give consideration to
108 child care centers and group child care homes that are located in
109 private or public school buildings. With respect to this subdivision
110 only, the commissioner shall implement policies and procedures
111 necessary to implement the physical plant requirements established
112 pursuant to this subdivision while in the process of adopting such
113 policies and procedures in regulation form. Until replaced by policies
114 and procedures implemented pursuant to this subdivision, any
115 physical plant requirement specified in the office's regulations that is
116 generally applicable to child care centers and group child care homes
117 shall continue to be applicable to such centers and homes that

118 exclusively serve school-age children. The commissioner shall print
119 notice of the intent to adopt regulations pursuant to this subdivision in
120 the Connecticut Law Journal not later than twenty days after the date
121 of implementation of such policies and procedures. Policies and
122 procedures implemented pursuant to this subdivision shall be valid
123 until the time final regulations are adopted.

124 (b) The commissioner may adopt regulations, pursuant to chapter
125 54, to establish civil penalties of not more than one hundred dollars per
126 day for each day of violation and other disciplinary remedies that may
127 be imposed, following a contested-case hearing, upon the holder of a
128 license issued under section 19a-80 to operate a child care center or
129 group child care home or upon the holder of a license issued under
130 section 19a-87b, as amended by this act, to operate a family child care
131 home.

132 (c) The commissioner shall exempt Montessori schools accredited by
133 the American Montessori Society or the Association Montessori
134 Internationale from any provision in regulations adopted pursuant to
135 subsection (a) of this section which sets requirements on group size or
136 child to staff ratios or the provision of cots.

137 (d) Upon the declaration by the Governor of a civil preparedness
138 emergency pursuant to section 28-9 or a public health emergency
139 pursuant to section 19a-131a, the commissioner may waive the
140 provisions of any regulation adopted pursuant to this section if the
141 commissioner determines that such waiver would not endanger the
142 life, safety or health of any child. The commissioner shall prescribe the
143 duration of such waiver, provided such waiver shall not extend
144 beyond the duration of the declared emergency. The commissioner
145 shall establish the criteria by which a waiver request shall be made and
146 the conditions for which a waiver will be granted or denied. The
147 provisions of section 19a-84 shall not apply to a denial of a waiver
148 request under this subsection.

149 (e) Notwithstanding the provisions of subparagraph (B) of
150 subdivision (2) of subsection (a) of section 19a-79-5a of the regulations

151 of Connecticut state agencies relating to physical examination
152 requirements and subsection (e) of section 19a-79-6a of the regulations
153 of Connecticut state agencies relating to immunization requirements,
154 homeless children and youths, as defined in 42 USC 11434a, as
155 amended from time to time, may be allowed to attend a child care
156 center or group child care home for up to ninety days. Any child care
157 center or group child care home that provides child care services to
158 homeless children and youths at such center or home shall maintain a
159 record on file of all temporary waiver determinations conducted under
160 this subsection for a period of two years after such homeless children
161 and youths are no longer receiving child care services at such center or
162 home.

163 Sec. 3. Section 19a-87b of the 2016 supplement to the general statutes
164 is repealed and the following is substituted in lieu thereof (*Effective*
165 *from passage*):

166 (a) No person, group of persons, association, organization,
167 corporation, institution or agency, public or private, shall maintain a
168 family child care home, as defined in section 19a-77, without a license
169 issued by the Commissioner of Early Childhood. Licensure forms shall
170 be obtained from the Office of Early Childhood. Applications for
171 licensure shall be made to the commissioner on forms provided by the
172 office and shall contain the information required by regulations
173 adopted under this section. The licensure and application forms shall
174 contain a notice that false statements made therein are punishable in
175 accordance with section 53a-157b. Applicants shall state, in writing,
176 that they are in compliance with the regulations adopted by the
177 commissioner pursuant to subsection (f) of this section. Before a family
178 child care home license is granted, the office shall make an inquiry and
179 investigation which shall include a visit and inspection of the premises
180 for which the license is requested. Any inspection conducted by the
181 office shall include an inspection for evident sources of lead poisoning.
182 The office shall provide for a chemical analysis of any paint chips
183 found on such premises. Neither the commissioner nor the
184 commissioner's designee shall require an annual inspection for homes

185 seeking license renewal or for licensed homes, except that the
186 commissioner or the commissioner's designee shall make an
187 unannounced visit, inspection or investigation of each licensed family
188 child care home at least once every year. A licensed family child care
189 home shall not be subject to any conditions on the operation of such
190 home by local officials, other than those imposed by the office
191 pursuant to this subsection, if the home complies with all local codes
192 and ordinances applicable to single and multifamily dwellings.

193 (b) No person shall act as an assistant or substitute staff member to a
194 person or entity maintaining a family child care home, as defined in
195 section 19a-77, without an approval issued by the commissioner. Any
196 person seeking to act as an assistant or substitute staff member in a
197 family child care home shall submit an application for such approval
198 to the office. Applications for approval shall: (1) Be made to the
199 commissioner on forms provided by the office, (2) contain the
200 information required by regulations adopted under this section, and
201 (3) be accompanied by a fee of fifteen dollars. The approval application
202 forms shall contain a notice that false statements made in such form
203 are punishable in accordance with section 53a-157b.

204 (c) The commissioner, within available appropriations, shall require
205 each initial applicant or prospective employee of a family child care
206 home in a position requiring the provision of care to a child, including
207 an assistant or substitute staff member, to submit to state and national
208 criminal history records checks. The criminal history records checks
209 required pursuant to this subsection shall be conducted in accordance
210 with section 29-17a. The commissioner shall also request a check of the
211 state child abuse registry established pursuant to section 17a-101k. The
212 commissioner shall notify each licensee of the provisions of this
213 subsection.

214 (d) An application for initial licensure pursuant to this section shall
215 be accompanied by a fee of forty dollars and such license shall be
216 issued for a term of four years. An application for renewal of a license
217 issued pursuant to this section shall be accompanied by a fee of forty

218 dollars and a certification from the licensee that any child enrolled in
219 the family child care home has received age-appropriate
220 immunizations in accordance with regulations adopted pursuant to
221 subsection (f) of this section. A license issued pursuant to this section
222 shall be renewed for a term of four years. In the case of an applicant
223 submitting an application for renewal of a license that has expired, and
224 who has ceased operations of a family child care home due to such
225 expired license, the commissioner may renew such expired license
226 within thirty days of the date of such expiration upon receipt of an
227 application for renewal that is accompanied by such fee and such
228 certification.

229 (e) An application for initial staff approval or renewal of staff
230 approval shall be accompanied by a fee of fifteen dollars. Such
231 approvals shall be issued or renewed for a term of two years.

232 (f) The commissioner shall adopt regulations, in accordance with the
233 provisions of chapter 54, to assure that family child care homes, as
234 defined in section 19a-77, shall meet the health, educational and social
235 needs of children utilizing such homes. Such regulations shall ensure
236 that the family child care home is treated as a residence, and not an
237 institutional facility. Such regulations shall specify that each child be
238 protected as age-appropriate by adequate immunization against
239 diphtheria, pertussis, tetanus, poliomyelitis, measles, mumps, rubella,
240 hemophilus influenzae type B and any other vaccine required by the
241 schedule of active immunization adopted pursuant to section 19a-7f.
242 Such regulations shall provide appropriate exemptions for children for
243 whom such immunization is medically contraindicated and for
244 children whose parents or guardian objects to such immunization on
245 religious grounds and require that any such objection be accompanied
246 by a statement from such parents or guardian that such immunization
247 would be contrary to the religious beliefs of such child or the parents
248 or guardian of such child, which statement shall be acknowledged, in
249 accordance with the provisions of sections 1-32, 1-34 and 1-35, by (1) a
250 judge of a court of record or a family support magistrate, (2) a clerk or
251 deputy clerk of a court having a seal, (3) a town clerk, (4) a notary

252 public, (5) a justice of the peace, or (6) an attorney admitted to the bar
253 of this state. Such regulations shall also specify conditions under which
254 family child care home providers may administer tests to monitor
255 glucose levels in a child with diagnosed diabetes mellitus, and
256 administer medicinal preparations, including controlled drugs
257 specified in the regulations by the commissioner, to a child receiving
258 child care services at a family child care home pursuant to a written
259 order of a physician licensed to practice medicine in this or another
260 state, an advanced practice registered nurse licensed to prescribe in
261 accordance with section 20-94a or a physician assistant licensed to
262 prescribe in accordance with section 20-12d, and the written
263 authorization of a parent or guardian of such child. Such regulations
264 shall specify appropriate standards for extended care and intermittent
265 short-term overnight care. The commissioner shall inform each
266 licensee, by way of a plain language summary provided not later than
267 sixty days after the regulation's effective date, of any new or changed
268 regulations adopted under this subsection with which a licensee must
269 comply.

270 (g) Upon the declaration by the Governor of a civil preparedness
271 emergency pursuant to section 28-9 or a public health emergency
272 pursuant to section 19a-131a, the commissioner may waive the
273 provisions of any regulation adopted pursuant to this section if the
274 commissioner determines that such waiver would not endanger the
275 life, safety or health of any child. The commissioner shall prescribe the
276 duration of such waiver, provided such waiver shall not extend
277 beyond the duration of the declared emergency. The commissioner
278 shall establish the criteria by which a waiver request shall be made and
279 the conditions for which a waiver will be granted or denied. The
280 provisions of section 19a-84 shall not apply to a denial of a waiver
281 request under this subsection.

282 (h) Notwithstanding the provisions of subdivision (2) of subsection
283 (b) of section 19a-87b-10 of the regulations of Connecticut state
284 agencies relating to physical examination requirements and subsection
285 (k) of section 19a-87b-10 of the regulations of Connecticut state

286 agencies relating to immunization requirements, homeless children
287 and youths, as defined in 42 USC 11434a, as amended from time to
288 time, may be allowed to attend a family child care home for up to
289 ninety days. Any family child care home that provides child care
290 services to homeless children and youths at such home shall maintain
291 a record on file of all temporary waiver determinations conducted
292 under this subsection for a period of two years after such homeless
293 children and youths are no longer receiving child care services at such
294 home.

This act shall take effect as follows and shall amend the following sections:

Section 1	<i>from passage</i>	17b-749(a)
Sec. 2	<i>from passage</i>	19a-79
Sec. 3	<i>from passage</i>	19a-87b

Statement of Legislative Commissioners:

In Subsec. (b) of Sec. 2, ", as amended by this act" was added after 19a-87b for clarity and consistency.

KID *Joint Favorable Subst. -LCO*

The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

OFA Fiscal Note

State Impact:

Agency Affected	Fund-Effect	FY 17 \$	FY 18 \$
Early Childhood, Off.	GF - Cost	\$760,000- \$2.3 million	\$760,000- \$2.3 million

Note: GF=General Fund

Municipal Impact: None

Explanation

The bill will result in a cost associated with requiring the Office of Early Childhood (OEC) to provide child care subsidies to children who are considered homeless and in need of protective services.

Based on the projected average monthly subsidy per family of \$469, this additional coverage group is anticipated to cost between \$760,000 and \$2.3 million annually. This assumes there are between 2,700 and 8,300 homeless families with children under the age of six, and a portion of this population will access services.¹ Ultimately, the cost will depend on the number of homeless children in the state and the percentage of families who access the Care4Kids program.

The Out Years

The annualized ongoing fiscal impact identified above would continue into the future subject to the number of children served and the Care4Kids subsidy amount per family.

¹ Connecticut Early Childhood Cabinet, "Homeless Families with Young Children" October 2015.

OLR Bill Analysis**sSB 10*****AN ACT INCREASING ACCESS TO CHILD CARE FOR CHILDREN WHO ARE HOMELESS.*****SUMMARY:**

The Care 4 Kids program, administered by the Office of Early Childhood (OEC), currently provides child care subsidies to low-income families with a parent or caretaker who (1) works or attends high school or (2) receives cash assistance through the temporary family assistance program (TFA) and participates in an approved education, training, or other job preparation activity.

This bill extends eligibility for Care 4 Kids subsidies to families with homeless children and youths, as defined in federal law, who are designated by OEC as in need of protective services for the purposes of the federal Child Care Development Block Grant (see BACKGROUND).

The bill also waives for up to 90 days the immunization and physical examination requirements in the Department of Public Health (DPH) regulations for a homeless child or youth attending a child care center, group child care home, or family day care home (see BACKGROUND). It requires these centers and homes to maintain a record on file of all such waivers for up to two years after the child or youth no longer receives services at the facility.

EFFECTIVE DATE: Upon passage

BACKGROUND***Homeless Children and Youths***

The law defines “homeless children and youths” as individuals who lack a fixed, regular and adequate nighttime residence, including

migratory children and children and youths who are:

1. sharing housing with other people due to loss of housing, economic hardship, or a similar reason;
2. living in motels, hotels, trailer parks, or camping grounds due to the lack of adequate alternative accommodations;
3. living in emergency or transitional shelters;
4. abandoned in hospitals;
5. awaiting foster care placement;
6. using as a primary nighttime residence a public or private place not designed for or ordinarily used as human sleeping accommodations; or
7. living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings (42 USC § 11434a(2)).

Child Care Development Block Grant (CCDBG)

Through CCDBG, the state receives federal funds for early childhood care and education services for eligible children. The Care 4 Kids program is funded in part through this grant.

Under the federal law, an “eligible child” for CCDBG purposes is one who is under age 13 with a family income below certain limits, and who either (1) resides with a parent or parents working or attending job training or education or (2) receives or needs to receive protective services and resides with a parent not working or attending job training or education (42 USC § 9858n).

Child Care Centers and Homes

A “child day care center” offers or provides supplementary care to more than 12 children outside their own homes on a regular basis.

A “family day care home” is a private family home caring for up to

six children, including the provider's own children, not in school full-time, where the child is cared for between three and 12 hours per day on a regular basis. Care may be provided between 12 and 72 consecutive hours to accommodate a need for extended care or intermittent short-term overnight care. During the regular school year, the provider may care for up to three additional children in school full-time, including his or her own children, or all of his or her children in school full-time if the provider has more than three children.

A “group day care home” offers or provides supplementary care (1) to between seven and 12 children on a regular basis or (2) meets the family day care home definition except that it is not in a private family home (CGS § 19a-77).

DPH Regulations – Immunizations, Health Records

DPH regulations require children seeking admission to or attending a child day care center, group day care home, or family day care home to be immunized as age-appropriate against a variety of illnesses (e.g., mumps, pertussis, tetanus). Under the regulations, operators of these facilities may not admit or allow a child unless the child’s parent provided documentation of the immunization, immunization-in-progress, or exemption from immunization.

The regulations require operators of child day care centers and group day care homes to maintain a record for each enrolled child, including a physical examination form complete within one year of enrollment and approximately yearly after that (Conn. Agency Regs. §§ 19a-79-5a(a)(2)(B), 19a-79-6a(e), 19a-87b-10(k)).

Additionally, DPH regulations require family day care home providers to have complete health records for children enrolling in or attending the home, based on a physical examination within the past year for preschoolers or within the period allowed by schools for older children (Conn. Agency Reg. § 19a-87b-10(b)).

COMMITTEE ACTION

Committee on Children

Joint Favorable

Yea 10 Nay 1 (02/25/2016)